

Concept Map 2

PT	Initials: TC Age: 3yr, 5m Gender: F
Medical Dx	Rickets
Dx Tests & Results	<ul style="list-style-type: none"> ● Labs: <ul style="list-style-type: none"> ○ Na: 138 ○ Cl: 99 ○ K: 4.2 ○ Bun:6 ○ Creat: 0.2 ○ Ca: 9.1 ○ Alb: 4.5 ○ Glu: 56 ○ Total Protein: 6.6 ○ Vit D: 51.8 ○ WBC: 7.0 ○ RBC: 4.47 ○ Hbg: 8.8 ○ Hct: 30.3% ○ Plt: 489
Assessment	<ul style="list-style-type: none"> ● NSR, RRR, S1&S2 ● Cap refill: >3 seconds ● Lung sounds clear bilaterally ● Non-verbal, able to groan ● Temp: 97.5, ● HR: 133 ● BP: 105/56 ● RR: 17 ● Pain was reported 0 out 10 from FLACC Scale ● Emesis of 50mL ● NG tube present ● Diet: Breast milk, TPN ● Last bowel movement was 2 days ago ● Abdomen is flat, soft non tender <ul style="list-style-type: none"> ○ BS heard X4 ● I&Os: Total for 03/19/23 is 840mL

<p>PMH</p>	<ul style="list-style-type: none"> ● Malnutrition ● Fracture of tibia (right) ● Autism Spectrum Disorder ● Non-verbal ● Rickets ● Seasonal Allergies ● Environmental Allergies ● Food allergies <ul style="list-style-type: none"> ○ Fish ○ Milk ○ Oats ○ Peanuts ○ Strawberry ○ Wheat ○ Mango ● Oral aversion ● Topic Dermatitis ● Congestion ● Anemia ● Eosinophilic esophagitis ● Failure to thrive
<p>Medications</p>	<ul style="list-style-type: none"> ● Acetaminophen 150 mg NG Q4H PRN ● Calcium Carbonate(500mg/5mL Ud) 250 mg NG BID SCH ● Cetirizine HCL 2.2 mg NG BID SCH ● Epinephrine HCL 0.15 mg IM PRN PRN ● Ergocalciferol 2000 unit NG DAILY SCH; protocol ● Ferrous Sulfate 15 mg NG 0800 SCH ● Ferrous Sulfate 30 mg NG 2000 SCH ● Hydrocortisone (2.5% Cream) 0 gm TP TID PRN ● Multivitamin Pediatric 1 mL NG DAILY SCH ● Olopatadine HCl 0 drops both eyes daily @ 1800 SCH ● Omeprazole 10 mg BIDAF SCH ● Polyethylene Glycol 8.5 gm NG DAILY SCH ● Sodium Chloride 0 ml BOTH NARES Q3H

Imbalanced nutrition less than body requirements related to low calorie intake of the infant as evidenced by FTT.

- 1. Poor diet habits, only eats rice, eggs, and breast milk.**
- 2. Vitamin D and calcium deficiency (Ricketts)**
- 3. Below 5th percentile for height and weight.**

Expected Outcome	Patient will consume adequate nutrition per the provider's orders by the end of day.
Interventions	<ul style="list-style-type: none"> • Verify with the provider and healthcare team to assess and develop a care plan for the patient, regarding importance of proper diet of nutrients, despite the patient's allergies. • Administer medications per provider's nutrition. • Educate the patient's mother on the orders. • Administer tube feed per provider's orders.
Evaluations	Goal was met by the end of the day.

Impaired mobility related to fractured right tibia as evidenced by the recently removed cast 2 weeks ago.

- 1. Need for weight bearing exercises**
- 2. Unsteady gait**
- 3. Pain at the fracture site**

Expected Outcome	In two hours, the patient will demonstrate exercises to improve physical mobility when going to PT.
Interventions	<ul style="list-style-type: none"> • Avoid putting pressure on the fracture site/tibia and avoid taking VS. • Make sure the environment is safe, bed rails up, bed in lowest position, important items on the table next to the patient, and call bell readily available. • Consult with PT for plan of care for patient • Educate family and the patient. • Encourage the patient's parent to help them do as much as they can to stay active.
Evaluations	Goal was met by the end of two hours. Patient was able to improve physical mobility

	after PT.
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Risk for infection related to impaired mobility as evidenced by being immobile from post operative care. Impaired verbal communication r/t developmental delay as evidenced by not hitting developmental milestones.

- 1. Autism spectrum disorder**
- 2. Limited vocabulary**
- 3. Language barrier**

Expected Outcomes	By the end of the day, the pt will attend speech therapy to assist with communication.
Interventions	<ul style="list-style-type: none"> ● Assess the patient and patient's parent's primary language and use a translator. ● Use visual aids and other methods/devices ● Pay attention to the patient's nonverbal cues. ● Educate on the importance of speech therapy.
Evaluations	Goal was met, by the end of the day the pt attended and participated in speech therapy.

Deficient knowledge of the patient's parent r/t lack of exposure about dietary needs and patient care as evidence by the patient's condition.

- 1. Patient's unbalanced nutritional status**
- 2. Failure to thrive**
- 3. Not demonstrating proper NG tube management.**

Expected Outcome	By the end of the week, the pt's parent will be able to demonstrate an understanding for pt's nutritional status, NG management, and therapies needed.
Interventions	<ul style="list-style-type: none"> ● Educate pt's parent in a clear and

	<p>understandable manner. Use a translator as well.</p> <ul style="list-style-type: none">● Teach the pt's about calcium intake, nutritional intake, and vitamin intake.● Educate the parent on therapies the pt will need.● Reassess the pt's parent's understanding and have them repeat it back.
Evaluations	Goal was not met. By the end of the week the pt's parent will be able to demonstrate an understanding for pt's care.